MSDH - Health Facilities Licensure and Certification

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	54NP	A. BUILDING: _____ B. WING _____	07/23/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SARDIS COMMUNITY NH	613 EAST LEE STREET SARDIS, MS 38666

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
M 000	Initial Comments The State Agency (SA) conducted an annual re-certification survey at the facility from 7/22/24 to 7/23/24. During the survey, the SA determined the facility was not in compliance with the Minimum Standards for Institutions for the Aged or Infirm, state licensure requirements and cited M610.	M 000		
M 610	45.21.2 Activities of daily living Activities of daily living. Each resident shall receive assistance as needed with activities of daily living to maintain the highest practicable well being. These shall include, but not be limited to: 1. Bath, dressing and grooming; 2. Transfer and ambulate; 3. Good nutrition, personal and oral hygiene; and 4. Toileting. This Statute is not met as evidenced by: Level II Based on observation, staff interview, and facility policy review the facility failed to provide Activities of Daily Living as evidenced by failure to provide daily oral care and nail care for one (1) of 16 residents reviewed. (Resident #31) Findings Included: Record review of the facility policy, "Oral Hygiene" with revision date of 10/17 revealed Purpose: To clean the mouth, teeth, gums ...To remove bacteria and odor... Procedure...1. Offer oral hygiene before breakfast, and at bedtime..."	M 610	On 7/23/24 the Registered Nurse (RN) Supervisor cleaned Resident #31 nails and provided oral care to his mouth at 10:15 a.m. Residents nail and oral care was audited by the Director of Nurses (DON) at 10:45 a.m. and there were no negative findings. All residents have the potential to be negatively affected by this deficient practice. An in-service was conducted by the Staff Development Licensed Practical Nurse (LPN) on the facility policy and procedure	9/6/24

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M 610	Continued From page 1 Record review of the facility policy, "Nail Care" with review date of 01/24 revealed "Purpose: To promote cleanliness, safety and a neat appearance... Procedure...7. Remove any debris from under the nails with the orangewood stick..." On 07/22/24 at 10:00 AM, an observation of Resident #31 revealed he was lying in bed, alert with his mouth open and a yellow substance covering all of his teeth. An observation of his hands revealed a brown substance under the fingernails of his left hand. On 07/23/24 at 9:45 AM, an observation with Licensed Practical Nurse (LPN) #1, revealed Resident #31 lying in his bed with a yellow substance covering his teeth and a brown substance under the fingernails of his left hand. LPN #1 confirmed that he had yellow buildup on his teeth and revealed this could cause tooth decay and other problems with his mouth. She revealed that the Certified Nursing Assistants (CNA)s were supposed to do mouth care every day and usually did this during their morning rounds while they were doing their baths. LPN #1 revealed they used mouth swabs to clean Resident #31's teeth because they were afraid of aspiration if they tried to brush his teeth. She agreed that Resident #31's mouth care had not been done. LPN #1 also confirmed the brown substance under the fingernails of Resident #31's left hand and stated, "I will find some clippers and do the nails now." She revealed that they scheduled fingernails to be clipped every Sunday, but nails should be looked at every day and checked for cleanliness. LPN #1 agreed dirty fingernails could cause infection if he scratched himself and the CNAs should have taken care of this.	M 610	for "Oral Hygiene" and a separate in-service was conducted by the Staff Development LPN on the facility policy and procedure on "Nail Care" on 7/23/24 at 10:30 a.m. The RN Supervisor checked all residents nail care and oral care in the building and there were no negative findings on 7/23/24 at 2:00 p.m. RN Supervisor will audit all nail care and oral care daily for the next 4 weeks, starting 8/5/24 and ending 9/5/24 and then monthly for the next 3 months and then quarterly. The RN supervisor will also present findings to the Quarterly QI meeting on 9/6/24 and then quarterly at each QI meeting until substantial compliance is achieved. If any negative findings occur with current plan of correction, the QI committee will revise the current plan if correction until compliance is obtained.	

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M 610	Continued From page 2 On 07/23/24 at 9:50 AM, an interview with Director of Nursing (DON), revealed mouth care was supposed to be completed at least once a day. She revealed the CNAs were responsible for completing mouth care and they used mouth swabs if the residents couldn't tolerate brushing their teeth. The DON confirmed personal hygiene included nail care and mouth care. She revealed that the CNAs were responsible for checking fingernails and this should be done every day. She also revealed that failure to provide nail care and oral care was unacceptable and could cause sores in the mouth, tooth decay and other problems. The DON stated, "This makes me angry." Record review of Resident #31's Face Sheet revealed an admission date of 08/08/19 and included diagnoses of Parkinson's Disease, Dysphagia following Cerebral Infarction, and Cognitive Communication Deficit.	M 610		